Address: Required Client Informa Phone: Requested Due Date: At. Iron, MN 55768 ITEM# SD 001 (Seep P.O. Box USS Corporation One Character per box.
(A-Z, 0-9 / , -)
Sample lds must be unique SAMPLE ID 020 Fax MATRIX
Drinking Water
Waste Water
Product
Soil/Soild
Cil
Wipe
Air
Other
Tissue Report To: Tom Moe
Copy To: Required Project Information: Section 8 Project Name: Purchase Order#: AM AM DA COD RELINQUISHED BY AFFILIATION MATRIX CODE (see valid codes to left) SAMPLE TYPE (G=GRAB C=COMP) NPDES-TB Wk1 24,11 21/4/16 04,11 91/4/16 donation DATE START SAMPLER NAME AND SIGNATURE TIME COLLECTED SIGNATURE of SAMPLER: PRINT Name of SAMPLER: CHAIN-OF-CUSTODY / Analyt NOT: 1274188 DATE END 71/1/15 TIME SAMPLE TEMP AT COLLECTION 14,05 # OF CONTAINERS Address: Invoice Information: Pace Project Manager Pace Quote: Company Name: Attention: Section C Unpreserved H2SO4 and make he Comborante ниоз Preservatives J. HCI NaOH ACCEPTED BY JASTILLATION ... Na2S2O3 heather.zika@pacelabs.com Methanol CLIENT: USS CORP YIN Analyses Test TSS,SO4 DATE Signed: TRPH 1664 9-776 Due Date: 09/21/16 140572.7 TEMP in C Residual Chlorine (Y/N) Received on SAMPLE CONDITIONS (Y/N) gency Custody Sealed Ç Cooler (Y/N) Samples Intact (Y/N)



Document Name:

Sample Condition Upon Receipt Form

Document No.: F-VM-C-001-Rev.09 Document Revised: 23Feb2015

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Issuing Authority:

Pace Virginia, Minnesota Quality Office

Sample Condition Client Name:			Project :	# WO#:1274188
Upon Receipt USS Call				
Courier: Fed Ex UPS	□USPS	×	Client	1274188
Commercial Pace Tracking Number:	Other	:	············	<u> </u>
			_	Optional: Proj. Due Date: Proj. Name:
Custody Seal on Cooler/Box Present? Yes	No.	Seals I	ntact?	Yes No Optional 110) out bate. 110) Name.
Packing Material: Bubble Wrap Bubble	Bags 🔲 N	one {	Other:	Temp Blank? Yes No
Thermometer Used: 😾 140792808	Type of	Ice:]Wet	Blue None Samples on ice, cooling process has begu
Cooler Temp Read °C: Cooler Temp	Corrected °	c: <u>2</u> 1.3	. <u>7</u> Date and	Biological Tissue Frozen? Yes No And Initials of Person Examining Contents:
Chain of Custody Present?	. ∠ Yes	□No	□n/a	1.
Chain of Custody Filled Out?	Yes	□No	□n/a	2.
Chain of Custody Relinguished?	Yes	□No	□N/A	3.
Sampler Name and Signature on COC?	Yes	No	. □N/A	4.
Samples Arrived within Hold Time?	XYes	□No	□N/A	5.
Short Hold Time Analysis (<72 hr)?	Yes	No.	□n/a	6.
Rush Turn Around Time Requested?	Yes	⊠ No	□N/A	7.
Sufficient Volume?	Yes	No	□N/A	8.
Correct Containers Used?	***********	□No	□N/A	9.
-Pace Containers Used?	Yes	□No	□N/A	
Containers Intact?	∕ Z ∀ es	□No	□N/A	10.
Filtered Volume Received for Dissolved Tests?	: Yes	×Νο	□N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	Yes	□No	□N/A	12.
-Includes Date/Time/ID/Analysis Matrix:				
All containers needing acid/base preservation will be checked and documented in the pH logbook.	∐Yes	×Νο	□n/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	Yes	□No	. X N/A	13,
Heads pace in VOA Vials (>6mm)?	Yes	□No	₩ N/A	14.
Trip Blank Present?	Yes	□No	N ∕A	15.
Trip Blank Custody Seals Present?	□Yes	□No	MA	
Pace Trip Blank Lot # (if purchased):				
CLIENT: NOTIFICATION/RESOLUTION Person Contacted:			[Field Data Required? Yes No
5	·			
·				
		• •		

hold, incorrect preservative, out of temp, incorrect containers)